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CONFIRMATION NO. 6132

Bib Data Sheet

SERIAL NUMBER 10/705,652	FILING OR 371(c) DATE 11/10/2003 RULE	CLASS 604	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 80121-08601
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/648,660 08/25/2000 PAT 6,811,546

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/24/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	CA	2	6	4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

LENA I. VINITSKAYA
 3200 LAKESIDE DRIVE
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 SANTA CLARA , CA 95054

TITLE

Endoscopic surgical access port and method

FILING FEE RECEIVED 2166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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